



1658

Under the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

120.00

Complete if Known

Application Number	10/575,991
Filing Date	April 13, 2006
First Named Inventor	Lital Alfonta
Examiner Name	Kagnew H. Gebreyesus
Art Unit	1656
Attorney Docket No.	54-000711US

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): **Deposit Account**  
 Deposit Account Deposit Account Number: **50-0893** Deposit Account Name: **Quine Intellectual Property Law Group, P.C.**

For the above identified deposit account, the Director is hereby authorized to : (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

#### Fee Description

	Small Entity
Each claim over 20 (including Reissues)	50 25
Each independent claim over 3 (including Reissues)	200 100
Multiple dependent claims	360 180

Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)   
- 20 or HP =  x  =

Multiple Dependent Claims  
Fee (\$) Fee Paid (\$)

Indep. Claims  Extra Claims  Fee (\$)  Fee Paid (\$)   
- 3 or HP =  x  =

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 27 CFR 1.16(s).

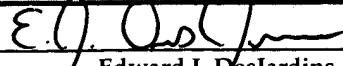
Total Sheets  Extra Sheets  Number of each additional 50 or fraction thereof  (\$) Fee Paid (\$)   
- 100  /50 =  Round up to a whole number) x  =

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):    
Other:  Petition for 1-month Extension of Time  120.00  
Other:   
Other:   
Other:   
Other:   
Other:

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	51,162	Telephone (510) 769-3602
Name (Print/Type)	Edward J. DesJardins, Ph.D.		Date	February 15, 2007



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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/575,991
		Filing Date	April 13, 2006
		First Named Inventor	Lital Alfonta
		Group Art Unit	1656
		Examiner Name	Kagnew H. Gebreyesus
Total Number of Pages in This Submission	13	Attorney Docket Number	54-000711US

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> PTO-1449 Form	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Cited References	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Copy of PCT Search Report	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> Response to Request for Restriction/Election and Amendment	<input type="checkbox"/> Copy of EP Search Report	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Additional Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Receipt Acknowledgement Postcard	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## Authorization to Charge Deposit Account

Please charge Deposit Account No. 50-0893 for any additional fees associated with this paper or during the pendency of this application, including any extensions of time for consideration of the documents enclosed.

Remarks

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Edward J. DesJardins, Ph.D., Reg. No. 51,162, Quine Intellectual Property Law Group, P.C.
Signature	
Date	February 15, 2007

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	Kimberly Cheung		
Signature		Date	February 15, 2007